

Indiana State Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 011437	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 09/16/2015
NAME OF PROVIDER OR SUPPLIER COMMUNITY HOSPITAL NORTH		STREET ADDRESS, CITY, STATE, ZIP CODE 7150 CLEARVISTA DR INDIANAPOLIS, IN 46256		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	<p>INITIAL COMMENTS</p> <p>This visit was for the investigation of one State hospital complaint.</p> <p>Complaint #: IN00180224 Unsubstantiated; lack of sufficient evidence. Deficiency unrelated to the allegations is cited.</p> <p>Date of Survey: 9/15/15 and 9/16/15</p> <p>Facility Number: 011437</p> <p>QA: cjl 09/21/15</p>	S 000		
S 930	<p>410 IAC 15-1.5-6 NURSING SERVICE</p> <p>410 IAC 15-1.5-6 (b)(3)</p> <p>(b) The nursing service shall have the following:</p> <p>(3) A registered nurse shall supervise and evaluate the care planned for and provided to each patient.</p> <p>This RULE is not met as evidenced by: Based on document review and interview, the nurse executive failed to ensure that nursing followed wound care orders for 1 of 5 wound care patients (Pt. #1).</p> <p>Findings: 1. Review of the medical record for patient #1, admitted on 6/24/15, indicated: a. A wound care consult on 6/25/15 at 11:49 AM had documentation that the "Plan" was for "left lateral foot painted with betadine, left open to air. Will order daily...". b. Notations in the medical record on 6/26/15</p>	S 930		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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S 930	Continued From page 1 and 6/28/15 lacked any documentation by nursing staff that betadine was applied to the left lateral foot, as ordered by wound care staff. 2. At 8:35 AM on 9/16/15, interview with staff member #50, the quality resources and risk manager, indicated that after thorough review of the medical record for patient #1, there is no documentation of wound care to the left lateral foot for the dates of 6/26/15 and 6/28/15, as ordered by the wound care nurse.	S 930			